

## PART B - FEE(S) TRANSMITTAL

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33031

7590

05/31/2006

CAMPBELL STEPHENSON ASCOLESE, LLP  
 4807 SPICEWOOD SPRINGS RD.  
 BLDG. 4, SUITE 201  
 AUSTIN, TX 78759  
 09/07/2006 ZJUWAR2 00000025 502306 09752001

01 FC:1501

1400.00 DA

02 FC:1504

300.00 DA

03 FC:8001

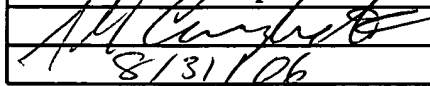
3.00 DA

## Certificate of Mailing or Transmission

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Samuel G. Campbell III

(Depositor's name)



(Signature)

(Date)

APPLICATION NO.

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/752,001

12/29/2000

Jay Hosler

XXXXXXXXXXCIS0034C1 7690

TITLE OF INVENTION: REFLECTOR COMMUNICATIONS CHANNEL FOR AUTOMATIC PROTECTION SWITCHING

US

APPLN. TYPE

SMALL ENTITY

ISSUE FEE

PUBLICATION FEE

TOTAL FEE(S) DUE

DATE DUE

nonprovisional

NO

\$1400

\$300

\$1700

08/31/2006

EXAMINER

ART UNIT

CLASS-SUBCLASS

ABELSON, RONALD B

2616

370-217000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Campbell Stephenson

1 Ascolese LLP

Samuel G. Campbell III

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cisco Technology, Inc.

San Jose, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies

1

4b. Payment of Fee(s):

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502306 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Date

Typed or printed name

Samuel G. Campbell III

Registration No.

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